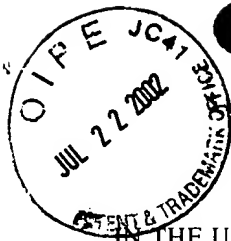


PATENT



COPY OF PAPERS
ORIGINALLY FILED

Docket No. 676-8cip

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) : Firooz Ghassabian
Serial No. : 09/428,228
Filed : October 27, 1999
For : ANTENNA SYSTEM FOR A WRIST COMMUNICATION DEVICE

Examiner: TBA
Group Art Unit: 2859

CERTIFICATE OF MAILING (37 C.F.R. 1.8a)

HON. COMMISSIONER OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

Sir:

I hereby certify that the attached a copy of the Amendment, Amendment Transmittal, Certificate of Mailing, Petition for Two Months Extension of Time, and Return Postcard along with any paper(s) referred to as being attached or enclosed and this Certificate of Mailing are being deposited with the United States Postal Service on the date shown below with sufficient postage as first-class mail in an envelope addressed to the: Commissioner of Patents and Trademarks, Washington, D.C. 20231.

Respectfully submitted,

SOFER & HAROUN, L.L.P.

By: Ester Aronova
Ester Aronova

Date: 7/15/02

Mailing Address:

SOFER & HAROUN, L.L.P.
317 Madison Avenue, Suite 910
New York, New York 10017
Tel:(212) 697-2800
Fax:(212) 697-3004

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PATENT

Docket No. 676-8cip

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Applicant(s) : Ghassabian
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Group Art Unit: 2859

AMENDMENT FEE TRANSMITTAL

HON. COMMISSIONER OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

Sir:

Transmitted herewith is an Amendment for the above-identified application.

☒ No additional fee is required.

☐ The additional fee has been calculated as shown below:

CLAIMS AS AMENDED

	Claims Remaining After Amendment		Highest No. Covered by Previous Payments	Present Extra	Rate	Additional Fee
Total Claims*	18	-	20	=0	x \$	\$ <u>0</u>
Independent Claims	2	-	3	=0	x \$	\$ <u>0</u>
Multiple Dependent Claim(s)	(If claims added by amendment include Multiple Dependent Claim(s) and there was no Multiple Dependent Claim(s) in application before amendment add \$260.00 to additional fee.)					\$ _____
	Total:					\$ <u>0</u>

☐ Verified Statement of "Small Entity" Status Under 37 CFR § 1.27
filed _____. Reduced Fees Under 37 CFR § 1.9(f)
(50% of total) paid herewith.

\$ _____

☐ Charge fee to Deposit Account No. 19-2825 . Order No. _____
A DUPLICATE COPY OF THIS SHEET IS ATTACHED.

* Includes all independent and single dependent claims and all claims referred to in multiple dependent claims. See 37 C.F.R. § 1.75(c).

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[X] The Commissioner is hereby authorized to charge any additional fees which may be required for this amendment, or credit any overpayment to Deposit Account No. 19-2825. Order No. 676-8cip
A DUPLICATE COPY OF THIS SHEET IS ATTACHED.

[] ___ Page(s) of substitute Sequence Listing

[] ___ Computer disk(s) containing substitute Sequence Listing

[] Statement under 37 C.F.R. § 1.825(b) that the computer and paper copies of the substitute Sequence Listing are the same.

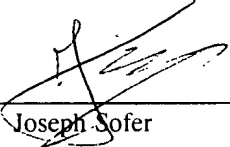
[] A check in the amount of \$ to cover the filing fee is attached.

Respectfully submitted,

SOFER & HAROUN L.L.P.

Dated: July 15, 2002

By:



Joseph Sofer

Registration No. 34,438

Mailing Address:

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